

# LCQ1: Manpower and resources for public healthcare services

Following is a question by Professor the Hon Priscilla Leung and a reply by the Secretary for Health, Professor Lo Chung-mau, in the Legislative Council today (June 26):

Question:

It has been reported that the situation of Hong Kong residents returning to Hong Kong for medical treatment after settling overseas for years has persisted for a long while. Among such residents, many are patients suffering from catastrophic illnesses such as cancer, and some of them are referred to public hospitals for further treatment after receiving preliminary treatment in private hospitals. Regarding the manpower and resources for public healthcare services, will the Government inform this Council:

(1) as a professor of a medical school at a university has reportedly pointed out that the number of patients returning to Hong Kong for medical treatment has slightly increased by 5% to 10% in recent years, whether the Government has compiled statistics on the exact figures and assessed if the existing manpower and resources for public hospitals can cope with the increase in the number of such patients;

(2) as the Secretary for Health indicated in a media interview in August last year that more than half of the local doctors were practising in the private market, serving about 13% of the patients in Hong Kong, which in effect means that less than half of the local doctors were practising under the public healthcare system, taking care of nearly 90% of the patients in Hong Kong, whether the Government has compiled statistics on the latest figures and formulated corresponding plans; and

(3) as it has been reported that a survey conducted by the Hong Kong Academy of Medicine in 2019 found that over 70% of the local young doctors interviewed showed signs of overexertion at work, and more than 20% of the doctors interviewed even had the problem of depression, whether the Government has gained an understanding of the actual situation and what corresponding plans it has put in place?

Reply:

President,

I would like to express my gratitude to Professor the Hon Priscilla Leung for her question on public healthcare manpower and resources. This is also our issue of concern. In consultation with the Hospital Authority (HA), the consolidated reply to the question is as follows:

(1) Public healthcare is the cornerstone and safety net of the healthcare system of Hong Kong. As the backbone of the public healthcare system, the HA provides healthcare services heavily subsidised by the Government at an average level over 97 per cent and is positioned to serve disadvantaged groups, provide acute and emergency healthcare services, provide treatments for severe diseases and those involving complex procedures, as well as support teaching, training and scientific research, etc.

At present, all holders of a valid Hong Kong Identity Card and children under 11 years of age who are Hong Kong residents can use subsidised public healthcare services as Eligible Persons (EPs). There is no requirement for service users to ordinarily reside in Hong Kong. The HA does not collect information on whether individual patients ordinarily reside in Hong Kong, nor does it compile statistics on the utilisation of public healthcare services by EPs who do not ordinarily reside in Hong Kong. At present, we cannot ascertain whether a large number of EPs who have moved to overseas earlier and returned to Hong Kong are using public healthcare services. The definition of EPs form part of the policy of fees and charges for public healthcare services. When reviewing the relevant policy according to the related mechanisms, the Government and the HA will keep in view changes to the patterns of residents in moving to the Mainland or overseas, as well as make reference to the subsidisation policies of other public services and social welfare.

(2) and (3) As at March 31, 2024, there are 16 459 doctors in Hong Kong, i.e. only 2.16 doctors per 1 000 persons, a ratio far lower than that of other advanced economies. While the public and private sectors each has around half of the doctor manpower, the public healthcare system provides 90 per cent of in-patient services in Hong Kong. It is generally undisputed that there is a shortage of healthcare manpower in Hong Kong and the workload of healthcare professionals is immense. I would first like to express my sincere gratitude to all healthcare staff, especially those working in the public healthcare system, for their unfailing efforts in providing efficient and appropriate services to the public.

To relieve the burden on the public healthcare system, especially the stress of healthcare professionals in public hospitals, the Government is committed to implementing a series of measures including development of primary healthcare, strengthening resources and manpower, as well as improving service efficiency. The Primary Healthcare Blueprint promotes prevention-oriented, community-based and family-centric strategies, while strengthening "Family Doctor for All" and focusing on early identification and early treatment, with a view to improving the overall health status of the population and establishing a sustainable healthcare system.

To strengthen resources and manpower, the Government has stepped up the investment of resources in training of healthcare professionals in recent years. The training capacity for various healthcare professions has increased significantly by 50 per cent in six years from about 4 000 in 2017-18 to about 6 000 in 2023-24. Apart from the creation of new pathways for the admission of non-locally trained doctors through the earlier amendment to the

Medical Registration Ordinance, we have also successively introduced bills to the Legislative Council to create new pathways for the admission of non-locally trained nurses and dentists. We are also exploring the admission of qualified non-locally trained supplementary medical professionals for working in the HA and the Department of Health. We will propose legislative amendments as soon as possible.

The HA also established the Task Group on Sustainability earlier to review various challenges including manpower shortage, as well as formulate strategies and implement various measures to attract, train and retain talents. These include enhancing recruitment of local graduates, re-hiring retired staff and recruiting non-locally trained doctors and part-time staff, while enhancing training and promotion opportunities as well as launching the Enhanced Home Loan Interest Subsidy Scheme, etc. The relevant measures have started to yield results. The number of doctors in the HA has increased by more than 260 in 2023-24 as compared with the previous year, and the attrition rate has also dropped from 8.1 per cent in 2021-22 to 5.2 per cent in 2023-24.

The physical and mental health of doctors is closely related to the provision of quality healthcare services. The Government values the survey conducted by the Hong Kong Academy of Medicine (HKAM) five years ago in 2019 as mentioned in the question. In view of the survey result, the HKAM launched the Well-being Charter in 2021 to put more emphasis on the promotion of the physical and mental health of healthcare staff through the ASAP model, namely "A" for Awareness, "S" for Self-care, "A" for Ask for help and "P" for Promotion of well-beings, so as to effectively prevent stress and overwork. The HKAM also established the Task Force on Well-being for planning and implementing various measures. These include measuring different aspects of work-related burnout and exhaustion through the Copenhagen Burnout Inventory questionnaire; recruiting peer supporters who learn about relevant support tips and practical skills through the training course designed by the Hong Kong College of Psychiatrists; and organising diversified outdoor sports and recreation activities to help doctors relieve fatigue and stress.

The HA also puts great emphasis on the mental health of their staff. The Oasis of the Corporate Clinical Psychology Services under the HA Head Office, the eight Critical Incident Psychological Services Centres in the clusters and a total of 30 Critical Incident Support Teams in various hospitals are committed to providing various mental health services to employees, including individual counselling, treatment groups, critical incident psychological services and mental health promotion, etc, thereby enhancing colleagues' mental health and resilience.

Apart from those measures targeting the mental health of healthcare staff, with measures to attract and retain talents gradually proving effective, the manpower situation and the work pressure of healthcare staff will also be improved. The HA will develop smart healthcare to continuously improve service quality and enhance efficiency. The HA will also continue to closely monitor the manpower situation as well as the stress and mental health of healthcare personnel, and proactively adopt measures to support

overall service demand and development.